

ISSUE SLIP STAPLE AREA (for additional cross references)

SECTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Haile</i>		<i>15-15-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>✓</i>	<i>5C 1036</i>	<i>05/31/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	10	
2	✓	18	
3	✓	29	
4	✓	3	
5	✓	17	
6	✓	11	
7	✓	6	
8	✓	2	
9	✓	1	
10	✓	10	
11	✓	11	
12	✓	12	
13	✓	13	
14	✓	14	
15	✓	15	
16	✓	16	
17	✓	17	
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45	✓	45	
46	✓	46	
47	✓	47	
48	✓	48	
49	✓	49	
50	✓	50	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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